



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
**DATAMASTER MAINTENANCE REPORT**

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN <b>Cabool PD 201291</b>	DATE OF INSPECTION <b>04/30/09</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>1200 South Holden Warrensburg</b>	TIME OF INSPECTION <b>1344</b>

**CHECKLIST:** Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <b>48</b> °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) <b>34.0</b>	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 <input checked="" type="checkbox"/> <b>.100</b>	TEST 2 <input checked="" type="checkbox"/> <b>.100</b>	TEST 3 <input checked="" type="checkbox"/> <b>.100</b>
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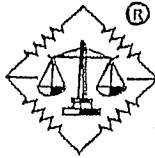
<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)					
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)					
REFUSALS —	(0-.04) —	(.05-.09) —	(.10-.14) —	(.15-.19) —	(Over .19) —

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

**Adjust voltages, recalibrate and tighten Sample Chamber Screws.**

**Guth Labs 0.10 Lot # 08280 Exp date 08/11/09**

<b>INSPECTING OFFICER</b>	
SIGNATURE <b>Tracey A. L.</b>	PRINT NAME <b>TRACEY DURBIN</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>920026 02/18/11</b>	TELEPHONE NUMBER <b>(660) 543-4573</b>



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-504-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08280** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1212** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **August 11, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



TRACEY DURBIN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER;INTOXILYZER 5000;ALCO-SENSOR IV/RBT IV

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 02/18/09

Number 920026

Expires 02/18/2011

MO 580-0771 (7-88)

*John J. Mathewson*

Director of State Public Health Laboratory

*Margaret T. Donnelly*

Director, Department of Health

Lab. 4 (R7-88)

# BAC DataMaster

## Evidence Ticket

STATE OF MISSOURI  
CABOOL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
04/30/09

TESTING OFFICER:

DURBIN/T

OFFICER I.D.: 4567

PERMIT NUMBER: 920026

EXPIRATION DATE: 02/18/11

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	13:47
INTERNAL STANDARD	VERIFIED	13:47
EXTERNAL STANDARD	.100	13:47
BLANK TEST	.000	13:48
EXTERNAL STANDARD	.100	13:48
BLANK TEST	.000	13:49
EXTERNAL STANDARD	.100	13:49
BLANK TEST	.000	13:50

N = 3

SIM. = .1

AVG. = .1

# BAC DataMaster

## Evidence Ticket

STATE OF MISSOURI  
CABOOL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
04/30/09

13:44

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

HEATERS  
SAMPLE CHAMBER: 48c

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnopqrstuvwxyz{|}~

Operator Signature



220

Operator Signature



2208-02

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
CABOOL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
04/30/09

ARREST TIME: 05:00  
SUBJECT NAME:  
TTTT  
DOB: 04/04/04 SEX: M  
STATE/D.L.: MO/4567  
ARRESTING OFFICER:  
DDDD  
OFFICER I.D.: 4444  
TESTING OFFICER:  
DURBIN/T  
OFFICER I.D.: 4567  
PERMIT NUMBER: 920026  
EXPIRATION DATE: 02/18/11  
MISCELLANEOUS DATA:  
RFI/CHECK

--- BREATH ANALYSIS ---

BLANK TEST	.000	13:53
INTERNAL STANDARD	VERIFIED	13:53
RADIO INTERFERENCE		

*[Signature]*

Operator Signature

2208

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
CABOOL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
04/30/09

ARREST TIME: 05:00  
SUBJECT NAME:  
TTTT  
DOB: 04/04/04 SEX: M  
STATE/D.L.: MO/4567  
ARRESTING OFFICER:  
DDDD  
OFFICER I.D.: 4444  
TESTING OFFICER:  
DURBIN/T  
OFFICER I.D.: 4567  
PERMIT NUMBER: 920026  
EXPIRATION DATE: 02/18/11  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	13:55
INTERNAL STANDARD	VERIFIED	13:55
SUBJECT SAMPLE	.096	13:56
BLANK TEST	.000	13:56

*7 seconds*

*[Signature]*

Operator Signature

2208-02